

CHAIN-OF-CUSTODY / Analytical HO#: 1286782

The Chain-of-Custody is a LEGAL DOCUMENT. All re PM: MMW Due Date:

Due Date: 05/17/17

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						ADDITIONAL COMMENTS										US-003 THICKENER	WS-003 Thickner Overflow	WS-002 Scrubber Make-Up	SAMPLE ID One Character per box. (A-Z, 0-91, -) Sample Ids must be unique		ted Due Date:	Fay:	Mt. Iron, MN 55/68	s: P.O. Box 417	ny: USS Corporation	Section A Required Client Information:
																Oversion			MATRIX CODE Drinking Vather DW Water WT Wasse Vaties WV Product SL Oil OL Wip Wip AR Other OT Tissue TS	3	Project #	Project Name:		Сору То:	Report To: Tom Moe	Section B
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faul mare	2			-	2/00	TIME													Unpreserved H2SO4 HNO3	3	Pace Profile #:	Pace Quote:	Address:	Company Name:	Attention:	Section C
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Document Name:

Sample Condition Upon Receipt Form

Document No.: F-VM-C-001-Rev.10

Document Revised: 15Mar2016

Page 1 of 1

Issuing Authority:
Pace Virginia, Minnesota Quality Office

Sample Condition Client Name: Project #: **Upon Receipt** WO#:1286782 USS Client Fed Ex UPS USPS Courier: PM: MMW Due Date: 05/17/17 Commercial Pace Other: CLIENT: USS CORP Tracking Number: Optional: Proj. Due Date: Proj. Name: Custody Seal on Cooler/Box Present? Yes No No Seals Intact? Yes Packing Material: Bubble Wrap Bubble Bags None Other: Temp Blank? No Thermometer Used: 140792808 Type of Ice: Wet Blue Samples on ice, cooling process has begun None Cooler Temp Read °C: 0, 3 Cooler Temp Corrected °C: 0.3 Biological Tissue Frozen? Yes No NA Temp should be above freezing to 6°C Correction Factor: +6.3 Date and Initials of Person Examining Contents: 8 5/3/17 Yes Chain of Custody Present? No □N/A 1. Yes Chain of Custody Filled Out? No □N/A 2. Chain of Custody Relinquished? No □N/A Sampler Name and Signature on COC? No □N/A Yes Samples Arrived within Hold Time? No □N/A Short Hold Time Analysis (<72 hr)? Yes No □N/A Yes No Rush Turn Around Time Requested? □N/A 7. Sufficient Volume? Yes No □N/A Yes No Correct Containers Used? □N/A TIYES □N/A -Pace Containers Used? No Yes No Containers Intact? N/A Filtered Volume Received for Dissolved Tests? Yes No □N/A 11. Note if sediment is visible in the dissolved containers Yes Sample Labels Match COC? No □N/A 12. -Includes Date/Time/ID/Analysis Matrix: See pH log for results and additional preservation All containers needing acid/base preservation will be Yes No □N/A documentation checked and documented in the pH logbook. Yes No N/A Headspace in Methyl Mercury Container Headspace in VOA Vials (>6mm)? Yes No N/A 14. Trip Blank Present? No Yes N/A 15. Trip Blank Custody Seals Present? Yes No N/A Pace Trip Blank Lot # (if purchased): CLIENT NOTIFICATION/RESOLUTION Field Data Required? Yes No Person Contacted: Date/Time: Comments/Resolution:

FECAL WAIVER ON FILE

M

TEMPERATURE WAIVER ON FILE

V |

Project Manager Review:

Date:

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)